



Mentee Transportation & Field Trip Permission Slip

I, _____ (Parent Name) give my consent for
_____ (Mentor Name) to transport my child _____
to/from (Home address) _____

My child's mentor has permission to transport my child on days the Fairfax Mentors
Project meets, takes field trips, or participates in other special, approved events.

Parent Name: _____

Parent Signature: _____ Date: _____